EXHIBIT 12

EXHIBIT 12

EXHIBIT 12



Case 3:17-cv-00167-MMD-VPC Document 23-12 Filed 03/31/17 Page 2 of 15

STATE OF NEVADA

BARBARA K. CEGAVSKE Secretary of State

KIMBERLEY PERONDI

Deputy Secretary for Commercial Recordings



Commercial Recordings Division

202 N. Carson Street Carson City, NV 89701-4201 Telephone (775) 684-5708 Fax (775) 684-7138

Copy Request

March 22, 2017

Job Number: **Reference Number:** 00010584914-32

C20170322-0881

Expedite: Through Date:

Document Number(s)	Description	Number of Pages
20100106924-45	Articles of Organization	2 Pages/1 Copies
20100108782-69	Initial List	1 Pages/1 Copies
20100162037-82	Certificate of Dissolution	1 Pages/1 Copies
20130461645-42	Certificate of Revival	4 Pages/1 Copies
20130461647-64	Annual List	1 Pages/1 Copies
20130461651-29	Acceptance of Registered Agent	1 Pages/1 Copies
20140084488-59	Annual List	1 Pages/1 Copies
20150036101-09	Annual List	1 Pages/1 Copies
20160047921-72	Annual List	1 Pages/1 Copies

Respectfully, achara K. Cegarske

BARBARA K. CEGAVSKE Secretary of State

Commercial Recording Division

202 N. Carson Street Carson City, Nevada 89701-4201 Telephone (775) 684-5708 Fax (775) 684-7138



ROSS MILLER Secretary of State 206 North Carson Street Carson City, Nevada 89701-4299 (775) 684 5708 Website: www.nvsos.gov

Articles of Organization Limited-Liability Company (PURSUANT TO NRS CHAPTER 86)

Filed in the office of	Document Number 20100106924-45
Ross Miller	Filing Date and Time 02/19/2010 1:50 PM
Secretary of State State of Nevada	Entity Number E0074962010-8

USE BLACK INK ONLY	- DO NOT HIGHLIGHT	ABOVE SPACE	CE IS FOR OFFICE USE ONLY
1. Name of Limited- Liability Company: (must contain approved limited-liability company wording; see instructions)	ROIL ENERGY, LLC		Check box if a Series Limited- Liability Company
2. Registered Agent for Service of Process: (check only one box)	Commercial Registered Agent: Nar Nar Noncommercial Registered Agent (name and address below) JANELLE L. EDINGTON Name of Noncommercial Registered Agent 8045 DOLCE VOLPE AVE. Street Address Mailing Address (if different from street address)	OR Name of Title of Office or Other Position of LAS VEGAS City	with Entity Nevada 89178 Zip Code Nevada
3. Dissolution	Making Address (if different from street addre	ess) City	Zip Code
Date: (optional)	Latest date upon which the company is	to dissolve (if existence is not perpetual):	
4. Management: (required)	Company shall be managed by:	Manager(s) OR Men	mber(s)
5. Name and Address of each Manager or Managing Member: (attach additional page if more than 3)	1) VAL HOLMS Name 470 HOLMS GULCH ROAD Street Address 2) ALLAN HOLMS Name 470 HOLMS GULCH ROAD Street Address 3) JOSEPH EDINGTON Name 470 HOLMS GULCH ROAD Street Address	HELENA City HELENA City	MT 59601 State Zip Code MT 59601 State Zip Code MT 59601 State Zip Code
6. Name, Address and Signature of Organizer: (attach additional page if more than 1 organizer)	VAL HOLMS Name 470 HOLMS GULCH ROAD Address	Organizer Signature HELENA City	MT 59601 State Zip Code
7. Certificate of Acceptance of Appointment of Registered Agent:		gistered Agent for the above named El	



ROSS MILLER Secretary of State 202 North Carson Street Carson City, Nevada 89701-4201 (775) 584 5708 Website: www.nvsos.gov

Registered Agent Acceptance

(PURSUANT TO NRS 77.310)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

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Certificate of Acceptance of Appointment by Registered Agent:

In the matter of	ROIL ENERGY	, LLC	estellität Mirk (1986 1) - 1990 (1996 1) - 1990 (1996 1) - 1990 (1996 1) - 1990 (1996 1) - 1990 (1996 1) - 199 Tanan (1996 1) - 1990 (1996 1) - 1990 (1996 1) - 1990 (1996 1) - 1990 (1996 1) - 1990 (1996 1) - 1990 (1996 1)	A NOTE AND THE TO MENTER BY MAKE A RESEARCH AND PROPERTY OF THE SERVICE OF THE SERVICE AS THE SE	
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am a: (complete only	one)	Name of Re	gistered Agent	THE RESERVE OF THE PARTY OF THE RESERVE OF THE PARTY OF T	
a) comme	cial registered	agent listed wit	h the Nevada Secr	etary of State,	
b) noncom	mercial registe	red agent with t	the following addre	ss for service of	process:
8045 DOLCE	VOLPE AVE.	The Minimize (1)、 ディを見てなり (All Minimize No. do concern co. a assess	LAS VEGAS	Nevada	89178
Street Address	The state of the s		City	to a transfer to a series of a series of the	Zip Code
		uma yapa umaa ini umaniy 👂 i inge i ini jaab il la la la la la la suudhi uz abada iyi inib jiri.	the property of the property o	Nevada	
Mailing Address (if different from stre	et address)	City	No	Zip Code
and hereby state t	hat on	02/15/10 Date	I accepted the ap	pointment as reg	istered agent
for the above nam	ed business ei	ntity.			
Signature:					
x Janoll	2 Sais	_Q		2/15/10	
Authorized Signature	of R.A. or On Beha	If of R.A. Company		Date	
/ 1					

INITIAL LIST OF MANAGERS OR MANAGING MEMBERS AND REGISTERED AGENT AND STATE BUSINESS LICENSE APPLICATION OF: FILE NUMBER ROIL ENERGY, LLC NAME OF LIMITED-LIABILITY COMPANY FOR THE FILING PERIOD OF FEB 2010 · TO 02-11, due 03-31-11 **YOU MAY FILE THIS FORM ONLINE AT www.nvsos.gov** The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is: Filed in the office of Document Number JANELLE L. EDINGTON 20100108782-69 8045 DOLCE VOLPE AVE. · Jake Filing Date and Time LAS VEGAS, NV 89178 Ross Miller 02/22/2010 2:28 PM Secretary of State Entity Number State of Nevada E0074962010-8 A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT: WWW.fivsos.gov USE BLACK INK ONLY - DO NOT HIGHLIGHT ABOVE SPACE IS FOR OFFICE USE ONLY Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.) IMPORTANT: Read instructions before completing and returning this form. Print or type names and addresses, either residence or business, for all manager or managing members. A Manager, or if none, a Managing Member of the LLC must sign the form. FORM WILL BE RETURNED IF UNSIGNED. If there are additional managers or managing members, attach a list of them to this form. 3. Initial list fee is \$125.00 . A \$75.00 penalty must be added for failure to file this form by the last day of the first month following organization date. 4. State business license fee is \$200,00. Effective 2/1/2010, \$100 must be added for failure to file form by deedline. 5. Make your check payable to the Secretary of State. 6. Ordaring Contest if requested above, one file stamped copy will be returned at no additional charge. To receive a cartified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 884-5708. 8. Form must be in the possession of the Secretary of State on or before the last day of the first month following the initial registration date. (Postmark date is not accepted as society date.) Forms received after due date will be returned for additional fees and penalties. Failure to include initial list and business license fees will result in rejection of INITIAL LIST FILING FEE: \$125.00 LATE PENALTY: \$75,00 BUSINESS LICENSE FEE: \$200.00 LATE PENALTY: \$100.00 Complete only if applicable Section 7(2) Exemption Codes Pursuant to NRS, this entity is exempt from the business license fee. 001 - Governmental Entity Exemption code: 002 - 501(c) Nonprofit Entity 003 - Home-based Business Month and year your State Business License expires: 20 005 - Motion Picture Company NAME (DOCUMENT WILL BE REJECTED IF TITLE NOT INDICATED) VAL HOLMS MANAGER MANAGING MEMBER ADORESS CITY STATE ZIP CODE 470 HOLMS GULCH ROAD HELENA 59601 MT (DOCUMENT WILL BE REJECTED IF TITLE NOT INDICATED) ALLAN HOLMS MANAGER **X** MANAGING MEMBER CITY STATE ZIP CODE 470 HOLMS GULCH ROAD HELENA MT 59601 (DOCUMENT WILL BE REJECTED IF TITLE NOT INDICATED) JOSEPH EDINGTON MANAGER **MANAGING MEMBER** ADDRESS CITY STATE ZIP CODE 470 HOLMS GULCH ROAD HELENA 59601 MT NAME (DOCUMENT WILL BE REJECTED IF TITLE NOT INDICATED) MANAGER MANAGING MEMBER ADDRESS CITY STATE ZIP CODE

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has compiled with the provisions of sections 6 to 18 of AS 146 of the 2008 session of the Nevade Legislature and acknowledge that pursuant to NRS 238,330, R is a category C felony to knowledgy offer any false or forged instrument for filing in the Office of the Secretary of State.

Title Date

MANAGING MEMBER 02/15/10



ROSS MILLER Secretary of State 204 North Carson Street, Suite 1 Carson City, Nevada 89701-4520 (775) 684 5708 Website: www.nvsos.gov

Dissolution of Limited-Liability Company (before commencement of business)

(PURSUANT TO NRS 86.490)

Filed in the office of	Document Number 20100162037-82		
Ross Miller	Filing Date and Time 03/16/2010 10:30 AM		
Secretary of State State of Nevada	Entity Number E0074962010-8		

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For a Nevada Limited-Liability Company
(Pursuant to NRS 86.490 - before commencement of business)

1. Name of the limited-liability company:	
2. The undersigned declare the following:	
(a) The management of the limited-liability	y company is vested in one or more managers;
(b) The limited-liability company has not o	commenced business, and
(c) No member's interest in the limited-lial	bility company has been issued.
3. Signatures: document must be signed by plain 8 1/2" x 11" sheet may be attached for	of at least two-thirds of the organizers or the managers; a additional signatures.
x /)////	X
Signature of Manager or Organizer	Signature of Manager or Organizer
X	X
Signature of Manager or Organizer	Signature of Manager or Organizer

FILING FEE: \$75.00

IMPORTANT: Failure to include any of the above information and submit with the proper fees may cause this filling to be rejected.



170402



ROSS MILLER Secretary of State 204 North Carson Street, Suite 1 Carson City, Nevada 89701-4520 (775) 684-5708 Website: www.nvsos.gov

Ross Miller Secretary of State

State of Nevada

Filed in the office of Document Number 20130461645-42

Filing Date and Time

07/12/2013 8:29 AM

Entity Number

E0074962010-8

Certificate of Revival

(PURSUANT TO NRS 86.580)

Page 1

USE BLACK INK ORLY - DO NOT HIGHLIGHT

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Certificate of Revival for a Nevada Limited-Liability Company (Pursuant to NRS 86.580)

1. Name of limited-liability company:		the contraction of the contracti
ROIL ENERGY, LLC		
2. Registered Agent for service of	process: (check only one box)	
Commercial Registered Agent	Name	
Noncommercial Registered Ag	ent Office or Positio	
FRANK C. GILMORE		
Name of Noncommercial Registered Age	nt OR Name of Title of Office or Oth	er Position with Entity
71 WASHINGTON STREET	RENO	NEVADA 89503
Street Address	City	Zip Code
<u></u>		NEVADA
Mailing Address (if different from street a	ddress) City	Zip Code
3. Date when revival of charter is the certificate: February	o commence or be effective, w	hich may be before the date of
4. Indicate whether or not the reviverevival is to continue. The corporation		t perpetual, the time for which the
PERPETUAL or		
(Time for which the	revival is to continue)	

This form must be accompanied by appropriate fees

Nevade Secretary of State 86,580 Revival Page 1 Revised: 5-14-10



ROSS MILLER Secretary of State 204 North Carson Street, Suite 1 Carson City, Neveda 89701-4520 (776) 884-5708 Website: www.nvsos.gov

Certificate of Revival

(PURSUANT TO NRS 86.580)

Page 2

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5. Names and addresses of managers, or if there are not managers, all of the managing members must be set forth: (additional pages may be attached as necessary) (indicate management; check one box only) ALLAN HOLMS Name 99224 WA 3625 W. WEST DRIVE SPOKANE State Zip Code **Address** City Manager or Managing Member JOSEPH EDINGTON Name SPOKANE WA 99223 702 EDENDERRY COURT Zip Code Address City Manager or Managing Member VAL HOLMS Name 59601 470 HOLMS GULCH ROAD HELENA MT State Zip Code City Address Manager <u>or Managing Member</u> Name State Zip Code City Address Manager or Managing Member Name

City

This form must be accompanied by appropriate fees

Address

Neveda Secretary of State 88.580 Revival Page 2 Revised: 5-14-10

State

Zip Code



ROSS MILLER Secretary of State 204 North Carson Street, Suite 1 Carson City, Nevada 89701-4520 (778) 684-5708 Webeits: www.nysos.gov

Certificate of Revival

(PURSUANT TO NRS 86.580)

Page 3

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- 6. The undersigned declare that the limited-liability company desires to revive its charter and is, or has been, organized and carrying on the business authorized by its existing or original charter and amendments thereto, and desires to continue through revival its existence pursuant to and subject to the provisions of Chapter 86.
- 7. The undersigned declares that he has been designated or appointed by the members to sign this certificate. Furthermore, the execution and filing of this certificate has been approved and secured by the written consent of a majority of the members.

nekiti)

Date

Date July 11 20

A REGISTERED AGENT ACCEPTANCE MUST ACCOMPANY THIS CERTIFICATE

IMPORTANT: Failure to include any of the above information and submit with the proper fees may cause this filing to be rejected,

This form must be accompanied by appropriate fees

Nevade Secretary of State 66,580 Ravival Page 3 Revieed: 5-14-10

JOINT DECLARATION OF INTENT TO REVIVE ROIL ENERGY, LLC

We, the majority Member Managers of Roil Energy, LLC, hereby declare our desire to revive its charter. We further declare that Roil Energy, LLC is, or has been organized and carrying on the business authorized by its original charter and that we desire to continue its existence pursuant to and subject to the provisions of Chapter 96 of the Laws of Nevada.

We further authorize Allan Holms to sign the Certificate of Revival for Roil Energy, LLC, and approve his doing so on our behalf as the Majority of Roil Energy's Member Managers.

DATED this 11th day of July, 2013

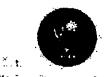
Allan Holms, Member Manager

Joseph Edington, Member Manager

NNUAL LIST OF MANAGERS OR MANAGING MI TATE BUSINESS LICENSE APPLICATION OF:					FILE NUMBER	
OIL ENERGY, LLC			·····		E0074962010-8	ĺ
ME OF LIMITED-LIABILITY COMPANY		}	···• · · · · · ·			•
OR THE FILING PERIOD OF July 2013 TO June 7		L	the offi		Document Number 2013046164	 7-64
e antity's skilly appointed registered agent in the State of Nevada upon whom prod	-	بسے ا	The Man	-	Filing Date and Time	
Frank C. Gilmore		Ross M			07/12/2013 8	3:29
71 Washington Street			ry of Sta	i '	Entity Number	
Reno, Nevada 89503		State o	f Nevada	j	E007496201	0-8
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A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT: W	VOQ. CONT. WWW					
SE BLACK INK ONLY - DO NOT HIGHLIGHT					FOR OFFICE USE ONLY	•
Return one file stamped copy. (If filing not eccompanied by on	·	rped copy will	be sent to n	gistared	agent.)	
<u>MPORTANT:</u> Read instructions before completing and returning this for Print or type names and addresses, either residence or business, for all manager		Manager, or if	one, a Mana	ging Mon	ber of the LLC must sign	
the form. FORM WILL BE RETURNED IF UNSIGNED. If there are additional managers or managing members, attach a list of them to ti	• -		•	•	-	
Return completed form with the fee of \$125.00. A \$75.00 penalty must be added		y the deadline.	An annuel Sal	received (more than 90 days before	
its due date shell be deemed an amended list for the previous year. State business itoense fee is \$200,00. Effective 2/1/2010, \$100,00 must be adde	ed for failure to file form by a	Seedline.				
Make your check payable to the Secretary of State.	·					
Ordering Copies: If requested above, one file stamped copy will be returned at A copy fee of \$2.00 per page is required for each additional copy generated w	: no additional charge. To re when ordering 2 or more file	icelve a certified stamped or cert	copy, enclose fled copies. A	e an accito Appropriate	one: \$30.00 per centricatio e instructions: must	m.
accompany your order.	-					
Return the completed form to: Secretary of State, 202 North Cerson Street, Carr Form must be in the possession of the Secretary of State on or before the last da	ey of the month in which it is	due. (Poetmer	t date is not a	ccepted no	receipt date.) Forme	
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CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN	BOX BELOW		NR	S.76.02	0 Exemption Codes	
					0 Exemption Codes mental Entity	
GHECK ONLY IF APPLICABLE AND ENTER EXEMPTION GODE IN Pursuant to NRS Chapter 76, this entity is exempt from the business.		on code:	001	- Govern - Motion	nmental Entity Picture Company	
Pursuant to NRS Chapter 76, this entity is exempt from the busines	ss license fee. Exemption	hed. Fallura	001	- Govern - Motion	mental Entity	
Pursuant to NRS Chapter 76, this entity is exempt from the busines	ss license fee. Exemption	hed. Fallura	001	- Govern - Motion	nmental Entity Picture Company	
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ROSS MILLER Secretary of State 202 North Carson Street Carson City, Nevada 89701-4201 (775) 684-6708 Wabsite: www.nvaoa.gov

Registered Agent Acceptance

(PURSUANT TO NRS 77.310)

This form may be submitted by: a Commercial Registered Agent, Noncommercial Registered Agent or Represented Entity. For more information please vialt http://www.nvsos.gov/index;sepx?page=141

Ross Miller
Secretary of State State of Nevada

Selection in the office of Document Number 20130461651-29

Filing Date and Time 07/12/2013 8:29 AM

Entity Number E0074962010-8

USE BLACK WK ONLY - DO NOT HIGHLIGHT

Certificate of Acceptance of Appointment by Registered Agent

n the matter of	ROIL ENERGY, LI	C
- The state of the	Name of Represented Busines	s Entity
F	RANK C. GILMORE	am a:
	Agent OR Represented Entity Servi	ng as Own Agent*
complete only one)		
a) commercial registered agen	it listed with the Nevada Secr	etary of State.
b) 🔀 noncommercial registered a	igent with the following addre	ss for service of process:
71 WASHINGTON STREET	RENO	Nevada 89503
Street Address	City	Zip Code
		Nevada
Mailing Address (if different from street ad-	dress) City	Zip Code
a) The represented antity appending	war and a starting of proposes at the	ha fallauina eddrace:
c) represented entity accepting	g own service of process at t	te tollowing address.
1		
Title of Office or Position of Person in Rep	resented Entity	
		Nevada
Street Address	City	Zip Code
		Nevada
Mailing Address (if different from street ad	dress) City	Zip Code
and hereby state that on 7/12/13	I accented the en	pointment as registered agent for
Code Code		positistic da legiscite agentioi
he above named business entity.		
X		17-17-13
Authorized Signature of R.A. or On Behalf of R.A	. Company	Date
*If changing Registered Agent when	reinstating, officer's signature	required.
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Signature of Officer	· •	Date

Nevada Secretary of State Form RA Acceptance Revised: 5-13-10

Case 3:17-cv-00167-MMD-VPC Document 23-12 Filed 03/31/17 Page 13 of 15

INITIAL/ANNUAL LIST OF MANAGERS OR MANAGING MEMBERS AND STATE BUSINESS LICENSE APPLICATION OF: ENTITY NUMBER ROIL ENERGY, LLC E0074962010-8 NAME OF LIMITED-LIABILITY COMPANY FEB, 2014 FEB, 2015 FOR THE FILING PERIOD OF TO USE BLACK INK ONLY - DO NOT HIGHLIGHT **YOU MAY FILE THIS FORM ONLINE AT www.nvsliverflume.gov** Return one file stamped copy. (If filing not accompanied by order instructions, Filed in the office of Document Number file stamped copy will be sent to registered agent.) 20140084488-59 · Ju Ken IMPORTANT: Read instructions before completing and returning this form. Filing Date and Time 1. Print or type names and addresses, either residence or business, for all manager or managing Ross Miller 02/03/2014 3:10 PM members. A Manager, or if none, a Managing Member of the LLC must sign the form. FORM WILL Secretary of State **Entity Number** BE RETURNED IF UNSIGNED. State of Nevada E0074962010-8 2. If there are additional managers or managing members, attach a list of them to this form. 3. Return completed form with the fee of \$125,00. A \$75,00 penalty must be added for failure to file this ABOVE SPACE IS FOR OFFICE USE ONLY form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year. 4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline. Make your check payable to the Secretary of State. 6. Ordering Copies: If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708. 8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing. ANNUAL LIST FILING FEE: \$125,00 LATE PENALTY; \$75,00 (if filing late) BUSINESS LICENSE FEE: \$200,00 LATE PENALTY: \$100,00 (if filing late) CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW NRS 76.020 Exemption Codes 001 - Governmental Entity Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: 005 - Motion Picture Company 006 - NRS 680B.020 Insurance Co. NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees. MANAGER OR MANAGING MEMBER JOSEPH EDINGTON ADDRESS CITY STATE ZIP CODE 702 EDENDERRY COURT, USA SPOKANE WA 99223 MANAGER OR MANAGING MEMBER ALLAN HOLMS ADDRESS CITY STATE ZIP CODE 3625 W WEST DRIVE, USA SPOKANE WA 99224 NAME. MANAGER OR MANAGING MEMBER VAL HOLMS **ADDRESS** CITY ZIP CODE STATE , USA HELENA 470 HOLMS GULCH ROAD 59601 MT NAME MANAGER OR MANAGING MEMBER None of the managers or managing members identified in the list of managers and managing members has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of a manager or managing member in furtherance of any unlawful conduct. I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

Signature of Manager, Managing Member or Other Authorized Signature

X ALLAN D HOLMES

Nevada Secretary of State Liet ManorMom

MANAGING MEMBER

2/3/2014 3:10:43 PM

Case 3:17-cv-00167-MMD-VPC Document 23-12 Filed 03/31/17 Page 14 of 15

INITIAL/ANNUAL LIST OF MANAGERS OR MANAGING MEMBERS AND STATE BUSINESS LICENSE APPLICATION OF: ENTITY NUMBER ROIL ENERGY, LLC E0074962010-8 NAME OF LIMITED-LIABILITY COMPANY FEB, 2015 FEB, 2016 FOR THE FILING PERIOD OF TO *100402* USE BLACK INK ONLY - DO NOT HIGHLIGHT **YOU MAY FILE THIS FORM ONLINE AT www.nvsilverflume.gov** Return one file stamped copy. (If filing not accompanied by order instructions, Filed in the office of Document Number file stamped copy will be sent to registered agent.) 20150036101-09 Ballo a K. Cegarde IMPORTANT: Read instructions before completing and returning this form. Filing Date and Time Barbara K. Cegavske Print or type names and addresses, either residence or business, for all manager or managing members. A Manager, or if none, a Managing Member of the LLC must sign the form. FORM WILL 01/27/2015 11:45 AM Secretary of State Entity Number BE RETURNED IF UNSIGNED. State of Nevada 2. If there are additional managers or managing members, attach a list of them to this form. E0074962010-8 3. Return completed form with the fee of \$125.00. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed ABOVE SPACE IS FOR OFFICE USE ONLY an amended list for the previous year. 4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline. Make your check payable to the Secretary of State. 6. Ordering Copies: If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order. 7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708. 8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing. ANNUAL UST FILING FEE: \$125.00 LATE PENALTY: \$75.00 (if filing late) BUSINESS LICENSE FEE: \$200.00 LATE PENALTY: \$100.00 (if filing late) CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW NRS 76.020 Exemption Codes 001 - Governmental Entity Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: 005 - Motion Picture Company 006 - NRS 680B.020 Insurance Co. NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees. NAME MANAGER OR MANAGING MEMBER JOSEPH EDINGTON ADDRESS CITY STATE ZIP CODE 702 EDENDERRY COURT, USA SPOKANE WA 99223 MANAGER OR MANAGING MEMBER ALLAN HOLMS ADDRESS: CITY STATE ZIP CODE 3625 W WEST DRIVE, USA WA 99224 MANAGER OR MANAGING MEMBER VAL HOLMS ADDRESS CITY ZIP CODE STATE , USA 470 HOLMS GULCH ROAD HELENA 59601 MT NAME MANAGER OR MANAGING MEMBER None of the managers or managing members identified in the list of managers and managing members has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of a manager or managing member in furtherance of any unlawful conduct. I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239,330, it is a category C felony to knowingly offer any false or forged instrument for filling in the Office of the Secretary of State. Date X ALLAN HOLMS

Signature of Manager, Managing Member or Other Authorized Signature

MANAGING MEMBER

1/27/2015 11:45:15 AM

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INITIAL/ANNUAL LIST OF MANAGERS OR MANAGING MEMBERS AND STATE BUSINESS LICENSE APPLICATION OF: ENTITY NUMBER ROIL ENERGY, LLC E0074962010-8 NAME OF LIMITED-LIABILITY COMPANY FEB, 2016 FEB, 2017 FOR THE FILING PERIOD OF TO USE BLACK INK ONLY - DO NOT HIGHLIGHT **YOU MAY FILE THIS FORM ONLINE AT www.nvsilverflume.gov** Return one file stamped copy. (If filing not accompanied by order instructions, Filed in the office of | Document Number file stamped copy will be sent to registered agent.) 20160047921-72 Barbon K. Cigarete IMPORTANT: Read instructions before completing and returning this form. Filing Date and Time Barbara K. Cegavske 1. Print or type names and addresses, either residence or business, for all manager or managing 02/01/2016 11:54 AM Secretary of State members. A Manager, or if none, a Managing Member of the LLC must sign the form. FORM WILL **Entity Number** BE RETURNED IF UNSIGNED. State of Nevada E0074962010-8 2. If there are additional managers or managing members, attach a list of them to this form. 3. Return completed form with the fee of \$150.00. A \$75.00 penalty must be added for failure to file this ABOVE SPACE IS FOR OFFICE USE ONLY form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year. 4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline. Make your check payable to the Secretary of State 6. Ordering Copies: If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must 7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708, 8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing. ANNUAL LIST FILING FEE: \$150.00 LATE PENALTY: \$75.00 (if filing late) BUSINESS LICENSE FEE: \$200.00 LATE PENALTY: \$100.00 (if filing late) CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW NRS 76.020 Exemption Codes 001 - Governmental Entity Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: 005 - Motion Picture Company 006 - NRS 680B,020 Insurance Co NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees. MANAGER OR MANAGING MEMBER JOSEPH EDINGTON ADDRESS CITY STATE ZIP CODE 702 EDENDERRY COURT, USA SPOKANE WA 99223 NAME MANAGER OR MANAGING MEMBER ALLAN HOLMS STATE ADDRESS CITY ZIP CODE 3625 W WEST DRIVE, USA SPOKANE WA 99224 NAME. MANAGER OR MANAGING MEMBER VAL HOLMS **ADDRESS** CITY ZIP CODE STATE 470 HOLMS GULCH ROAD , USA HELENA MT 59601 NAME MANAGER OR MANAGING MEMBER None of the managers or managing members identified in the list of managers and managing members has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of a manager or managing member in furtherance of any unlawful conduct. I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239,330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

Signature of Manager, Managing Member or Other Authorized Signature

X ALLAN HOLMS

MANAGING MEMBER

2/1/2016 11:54:03 AM